



## UNITED STATES PATENT AND TRADEMARK OFFICE

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WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 2201

<b>SERIAL NUMBER</b> 10/039,584	<b>FILING DATE</b> 10/26/2001 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2152	<b>ATTORNEY DOCKET NO.</b> 5489-69021
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**APPLICANTS**  
James R. Buechler, Terre Haute, IN;  
Evan Farmer, Norfolk, VA;  
Todd J. Smaka, Indianapolis, IN;

**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLN CLAIMS BENEFIT OF 60/243,374 10/26/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
\*\* 02/07/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWING</b> 39	<b>TOTAL CLAIMS</b> 52	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**  
Richard D. Conard  
Barnes & Thornburg  
11 S. Meridian Street  
Indianapolis, IN 46204

**TITLE**  
Method of facilitating medical consultations

<b>FILING FEE RECEIVED</b> 723	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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